

# What Happens to Me Under the AHCA?

### I receive health care coverage through my employer:

The vast majority of Americans receive their health care coverage through their employer. You, along with roughly 155 million Americans who receive health care coverage through their employer, are not directly affected by the AHCA.

#### I receive health care coverage through Medicare:

You, along with the more than 55 million Americans on Medicare, will not see any changes to your health care coverage as a direct effect of the AHCA.

### I'm a veteran or receive health care coverage through the military (Tricare, etc.):

You will not see any changes to your health care coverage as a direct effect of the AHCA.

## I'm currently enrolled in traditional Medicaid:

Current enrollees will not see any changes to their health care coverage as a direct effect of AHCA through 2020. In 2020, the federal government would set a defined upper limit on the amount of money for which state Medicaid programs can receive matching funds to cover each person enrolled in a state's Medicaid program. States will then each determine how much they will spend of their budgets on the program.

#### I receive health care coverage from Obamacare's Medicaid expansion:

Your health coverage as an expansion enrollee is grandfathered and you will not see any direct effect to your health care coverage under the AHCA for as long as you remain eligible and enrolled. As your life circumstances change over time, you may eventually move to the individual insurance market, where a tax credit will help you purchase health insurance. Or you may eventually receive health care through your employer, other government programs, or through innovative programs established in your state and funded by the AHCA's Patient and State Stability Fund.

#### I'm an adult under the age of 26 and do not have employer sponsored health care:

You remain eligible to receive coverage under your parent's health insurance plan.

# I purchase health insurance on my own in the individual insurance market:

You and your family are eligible for a monthly tax credit—between \$2,000 and \$14,000 a year—for purchasing private, quality coverage of your choice. Further, the AHCA establishes a \$138 billion Patient and State Stability Fund to assist in providing coverage and lowering costs for patients. With this fund, states can establish high-risk pools, cut out-of-pocket costs, establish innovative risk-sharing programs, participate in a federal risk-sharing program, and generally increase the number of health care options available to you.

#### I have a pre-existing condition:

Under our plan insurance companies are prohibited from denying coverage on the basis of a pre-existing condition, banned from rescinding coverage based on a pre-existing condition, and prevented from raising premiums on individuals with pre-existing conditions who maintain continuous coverage. In the rare circumstances for which a person may be charged more for a pre-existing condition, a person must:

- reside in a state with a federally approved waiver and a risk mitigation program;
- have a pre-existing condition;
- be uninsured because they have not maintained continuous coverage; and
- purchase health care in the individual market.

For these rare individuals, the AHCA provides \$8 billion, specifically targeted to reduce the premiums and out-of-pocket costs, which is included in the \$138 billion Patient and State Stability Fund to help provide coverage and lower costs for patients. With the Patient and State Stability Fund, states can cut out-of-pocket costs, establish innovative risk-sharing programs, participate in a federal risk-sharing program, and generally increase the number of health care options available to you.

# I or someone in my family has a mental health condition or substance abuse issue:

The AHCA makes no changes to existing mental health and substance abuse parity laws, which ensure equal treatment of these conditions within insurance plans. The AHCA also provides \$15 billion as part of the \$138 billion Patient and State Stability Fund specifically targeted at helping states provide coverage for these conditions.